


NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES	Docket Number (Optional) 11086.000812								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 5px;">In re Application of Wilkins, David, et al.</td> </tr> <tr> <td style="width: 50%; padding: 5px;">Application Number 09/725,325</td> <td style="width: 50%; padding: 5px;">Filed November 28, 2000</td> </tr> <tr> <td colspan="2" style="padding: 5px;">For VIDEO-EDITING WORKFLOW METHODS AND APPARATUS THEREOF</td> </tr> <tr> <td style="padding: 5px;">Art Unit 2621</td> <td style="padding: 5px;">Examiner NGUYEN, HUY THANH</td> </tr> </table>		In re Application of Wilkins, David, et al.		Application Number 09/725,325	Filed November 28, 2000	For VIDEO-EDITING WORKFLOW METHODS AND APPARATUS THEREOF		Art Unit 2621	Examiner NGUYEN, HUY THANH
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Art Unit 2621	Examiner NGUYEN, HUY THANH								
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.									
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ _____									
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____									
<input type="checkbox"/> A check in the amount of the fee is enclosed.									
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.									
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.									
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>03-3875</u> . I have enclosed a duplicate copy of this sheet.									
<input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input type="checkbox"/> attorney or agent of record. Registration number _____ <input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. <u>55,112</u>	 _____ Signature _____ Michael J. Didas Typed or printed name _____ (585) 232-6500 Telephone number _____ March 15, 2007 Date								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".									
<input type="checkbox"/> Total of _____ forms are submitted.									